PTO/SB/01 (10-01)

Approved for use through 10/31/2022 UMB 0551-0032

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	DECLARATIO	Attorney Docket Number		LE05.00118		
	DI PATENT	First Named Inventor Vijay, Vasu COMPLETE IF KNOWN				
	(37 0	Application Number Unknown				
	Declaration	Declaration	Filing Date			
	Submitted C with Initial	OR Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Art Unit	Unkr	low	
	Filing		Examiner Name	Unk	mown	

	required)	Examiner Name	Unknown						
As the below named inventor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original and first triventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
DISTRIBUTED KNOWLEDGE MANAGEMENT SYSTEM									
				1					
the specification of which	(Title of the Inc	vention)							
ָר ק									
is attached hereto									
OR		J							
was filed on (MM/DD/YYYY)		as United States A	pplication Number	r or PCT International					
Application Number	and was amender	d on (MM/DD/YYYY)		(if applicable).					
									
I hereby state that I have reviewed and any amendment specifically referred to	d understand the contents of above.	the above identified speci	fication, including t	the claims, as amended by					
I acknowledge the duty to disclose info	ormation which is material to r	patentability as defined in	37 CFR 1.56, inclu	uding for continuation-in-part					
international filing date of the continua	cii decame avallable between i ation-in-part application.	me ming date of the prior	application and the	e national or PCT					
I hereby claim foreign priority benefits breeder's rights certificate(s), or 365(c)									
States of America, listed below and h breeder's rights certificate(s), or any claimed.									
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Attached?					
Number(s)	Number(s) Country (MM/DD/YYYY) Not Claimed YES NO								
Additional foreign application num	mhers are listed on a sunder	santal priority data chaos E	TO ICO MODE ON OUR						
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[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND 10: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-01)
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DECLARATION — Utility or D sign Pat nt Application

Direct all correspondence to:	Customer Numbe or Bar Code Labe	∵ I '7₽	851	OR	Co	nrespondence address below		
Stephen R. Loe								
Name								
P.O. Box 649								
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USA Country		172) 712-4881 phone				(972) 712-4882 Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INV	ENTOR:	A petition h	as bee	en filed for t	his unsig	ned inventor		
Given Name Vaisu (first and middle [if any]) Family Name or Sumane								
Inventor's Signature	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
Richardson	,	TX		USA		USA		
Residence: City		State		Country		Citizenship		
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Richardson		TX		750	182	USA		
City		State		ZIP		Country		
NAME OF SECOND INVENTOR		A petition has	been	filed for this	s unsigne	d inventor		
Given Name (first and middle [if any]) Or Sumame								
Inventor's Signature					Date			
_								
Residence: City	State		Country		Citizenship			
Mailing Address								
City		State		ZIP		Country		
Additional inventors are being name	d on thesupp	olemental Addition	nal Inve	ntor(s) sheet(:	s) PTO/SB/	02A attached hereto.		

PTO/SB/81 (06-03)
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· \	Application Number	Unknown		
POWER OF ATTORNEY	Filing Date	Unknown		
and	First Named Inventor	Vijay, Vasu		
CORRESPONDENCE ADDRESS	Title	DISTRIBUTED KNOWLEDGE MANAGEMENT SYSTEM		
INDICATION FORM	Art Unit	Unknown		
	Examiner Name	Unknown		
	Attorney Docket Number	LEDS.00118		

I hereby appoint:										
Practitione	rs at Custom	er Number:								
OR										
Practitioner(s) named below:										
	Name					Registration Number				
Stephe	Stephen R. Loe				43,757					
Allen S	Allen Scott Lineberry			44.	873					
		-								
as my/our attorne I rademark Office	y(s) or agent connected th	(s) to prosecut erewith.	e the application	identified above,	and to tra	ansact all busines	s in the U	nited States Patent and		
Please recognize	or change th	e corresponde	noe address for	the above identifi	ed anotic:	ation to				
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OR				<u> </u>						
	r Iual Name	Stephen	R. Loe							
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Country Telephone		U.S.A.			F					
I am the:		(972) 712-4	9891		Fax	(972) 712-4882				
Applicant/Inventor										
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)										
SIGNATURE of Applicant of Assignee of Record										
Name Vasu Vilay										
Signature										
Date 12 12 206 3 Telephone (972) 605-3176						605-3176				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.										
Total of forms are submitted.										

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestion for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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